

Please type a plus sign (+) inside this box → +

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number		FMCE-P115
	First Named Inventor		Baird
	<i>COMPLETE IF KNOWN</i>		
	Application Number		
	Filing Date	12/12/2003	
	Group Art Unit		
	Examiner Name		

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CONVEYING APPARATUS WITH PIEZOELECTRIC DRIVER

(Title of the Invention)

the specification of which

☒ is attached hereto
OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below, and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto
60/434,935	12/19/2002	

Based on PTO/SB/01 (10-00)

[Page 1 of 2]

HENRY C. QUERY, JR.

Patent Attorney At Law

Please type a plus sign (+) inside this box → +

DECLARATION – Utility or Design Patent Application

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office in connection therewith:

Name	Registration Number	Name	Registration Number
Henry C. Query, Jr.	35,650		

Direct all correspondence to: ☐ Customer Number or Bar Code Label OR ☒ Correspondence address below

Name Henry C. Query, Jr.

Address 504 S. Pierce Ave.

Address

City Wheaton

State IL

ZIP 60187

Country U.S.A.

Telephone 630-260-8093

Fax 630-260-8093

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle (if any)) Randy K.

Family Name
or Surname Baird

Inventor's
Signature

Date

Residence: City Bollivar

State PA

Country US

Citizenship US

Mailing Address 150 Midget Camp Road

Mailing Address

City Bollivar

State PA

ZIP 15923

Country US

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle (if any)) Jeffery L.

Family Name
or Surname Cable

Inventor's
Signature

Date

Residence: City New Florence

State PA

Country US

Citizenship US

Mailing Address 732 Mulligan Hill Road

Mailing Address

City New Florence

State PA

ZIP 15944

Country US

☒ Additional inventors are being named on the 1 Supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

[Page 2 of 2]

HENRY C. QUERY, JR.

Patent Attorney At Law

Please type a plus sign (+) inside this box → +

DECLARATION	ADDITIONAL INVENTOR(S) Suppl mental Sheet Page 1 of 1
--------------------	--------------------------------------------------------------------

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name(first and middle (if any))		Family Name or Surname	
Garry		Kostel	
Inventor's Signature		Date	
Residence: City Latrobe	State PA	Country US	Citizenship US
Mailing Address 1012 Valleyview Drive			
Mailing Address			
City Latrobe	State PA	ZIP 15650	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name(first and middle (if any))		Family Name or Surname	
Henry J.		Nicolo	
Inventor's Signature		Date	
Residence: City Homer City	State PA	Country US	Citizenship US
Mailing Address 25 Oakland Avenue			
Mailing Address			
City Homer City	State PA	ZIP 15748	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name(first and middle (if any))		Family Name or Surname	
Dale		Cameron	
Inventor's Signature		Date	
Residence: City Rossiter	State PA	Country US	Citizenship US
Mailing Address 5290 Lockvale Road			
Mailing Address			
City Rossiter	State PA	ZIP 15772	Country US

Based on PTO/SB/02A (3-97)

HENRY C. QUERY, JR.

Patent Attorney At Law